

HOW TO DO IT, VOL. 1: MANAGEMENT/ EMPLOYMENT/ COUNSELLING

3rd ed. 249 pp. Edited by Deborah Reece. BMJ Publishing Group, London. 1995. Distributed in Canada by the Canadian Medical Association, Ottawa. \$33.75, CMA members; \$40.50, nonmembers; \$87.75 (set of three volumes), CMA members; \$105.30 (set of three volumes), nonmembers. Prices include shipping and handling. ISBN 0-7279-0848-0 (Vol. 1).

Overall rating: Poor, from the point of view of Canadian physicians

Strengths: Short, practical guidelines

Weaknesses: Oriented to the British health care system

Audience: British physicians

This book is a collection of short articles (2 to 11 pages), many of which were previously published in the *British Medical Journal*. Although some of the articles are general and would be valuable to Canadian physicians, most are specific to the British context.

The book is divided into three sections. The first, on management, consists largely of articles giving suggestions on how to deal with the National Health Service bureaucracy in Britain. Only the occasional article, such as the one on chairing a committee, is relevant to Canadian physicians. Most others deal with such subjects as the regulations for admitting patients to psychiatric hospitals. The second section, on employment, deals largely with house staff and consultants in the British hospital system. One good paper in this section is about how to provide a reference. The third section, on counselling, is the only section that is generally pertinent to

Canadian physicians, but it is much shorter than the other sections.

Although this book is undoubtedly very valuable to British physicians, its few articles pertinent to Canada do not justify giving it space on Canadian shelves.

Douglas P. Black, MD, MCISc
Fort Frances, Ont.

TURNING LEAD INTO GOLD: HOW HEAVY METAL POISONING CAN AFFECT YOUR CHILD AND HOW TO PREVENT AND TREAT IT

Nancy Hallaway and Zigurts Strauts. 215 pp. New Star Books Ltd., Vancouver, BC. 1995. \$18. ISBN 0-921586-51-5

Overall rating: Poor

Strengths: Very readable

Weaknesses: Contains misinformation and unsupported claims

Audience: Lay readers

This book reminds me of a shelf of other books that I discovered on a trip to the public library. Each book attributes a symptom complex to a trendy modern affliction such as chronic candidiasis, multiple chemical sensitivity or dental-amalgam poisoning. Common to all of these is a chronic affliction with multiple symptoms that several practitioners have failed to diagnose. Then a savour appears with a diagnosis and a cure, which, of course, is not accepted by the incompetent medical establishment.

Turning Lead into Gold is written to inform the masses of an unappre-

ciated, undiagnosed "worldwide health epidemic involving innocent young children." The principal author, a nurse and the mother of autistic twin boys, shares her discovery that lead poisoning is the cause of her sons' affliction. Her coauthor, a family physician, made the diagnosis and presumably prescribed the treatment. Their motivation for writing this book is best described by them. "We could not withhold this critical medical information that could improve the lives of hundreds of thousands, perhaps millions of young children and their families. We felt that, ethically, not telling our story could be the equivalent of child neglect and medical irresponsibility."

We are introduced to Cameron and Brett, the Hallaway "twins from hell." We learn of their need for 24-hour supervision, their sleep disorder, their destructive behaviour, lack of speech, refusal to wear clothes and constant fecal smearing. The medical establishment categorizes the boys as having attention-deficit disorder with autistic tendencies and offers no real help. The zenith of the mother's frustration and guilt is revealed in her disclosure of a plan for a murder-suicide involving her and her children. Then a chance comment during a visit to a physician for a personal health problem results in a diagnosis of lead poisoning and subsequent chelation therapy, which brings about an immediate improvement in the boys' behaviour. But a new frustration, coupled with anger, sets in because mainstream medicine, public health and the government will not accept the diagnosis and intervene to remedy alleged environmental pollution hazards.

As a pediatrician and a toxicologist, a card-carrying member of the untrustworthy and despicable mainstream, I find it easy to poke holes in the diagnosis. The boys were diagnosed with the use of hair analysis, which is controversial because it is unreliable. Penicillamine urine chelation challenge testing is unheard of. Ethylenediaminetetraacetic acid (EDTA) is the agent for which normative data exist. The large number of abnormalities found in the boys' trace-mineral and heavy-metal analysis makes its reliability questionable. Because the pharmacokinetics of lead are best described as snail-like, with a half-life measured in weeks or months, it is difficult to attribute the boys' marked and immediate improvement to chelation therapy. Finally, if the twins acquired their severe symptoms from exposure to heavy metals during home renovation, why was their sister unaffected?

Turning Lead into Gold is written in a colloquial style, heavily spiced with vernacular, such as "Cadmium is one bad ass supertoxic heavy metal," "These little guys would have been toast," and "bureaucratic crap." The chief shortcoming is Hallaway's resolute conviction that lead is the villain. She cites authorities selectively. The US Centers for Disease Control and Prevention (CDC) are extensively quoted; however, the CDC's standard for diagnosis of lead toxicity is a blood test and not a hair test. Hallaway makes many unsupported statements. (There is a reference list at the end of the book but no citations or footnotes in the text).

This book belongs on that shelf that I discovered at the library. All of us should read one of these books, but only one. The experience provides insight.

Milton Tenenbein, MD, FRCPC
Professor
Pediatrics and Pharmacology
University of Manitoba
Winnipeg, Man.

NATURAL WOMEN'S HEALTH: A GUIDE TO HEALTHY LIVING FOR WOMEN OF ANY AGE

Lynda Wharton. 270 pp. Illust. New Harbinger Publications, Inc., Oakland, Calif. 1995. \$20.50. ISBN 1-57224-007-5

Overall rating: Fair

Strengths: Contains fascinating herbal and homeopathic remedies; provides motivation to change unhealthy behaviours; and recognizes role of medical treatment for some problems

Weaknesses: Some inaccuracies, tendency to overstate conclusions and to quote medical information out of context

Audience: Health care professionals and educated patients interested in a complementary-medicine approach to women's reproductive and biological health

Lynda Wharton, a New Zealand naturopath and acupuncturist, is the author of this compact, soft-cover book, which would appeal to a well-educated woman seeking a complementary-medicine approach to this topic. It may also appeal to her physician. Wharton covers several of reproductive-health issues affecting women, as well as more general topics such as exercise, nutrition and stress. However, Wharton does not include social, emotional and spiritual aspects of women's lives, which are included in some more comprehensive definitions of women's health. Even if these topics were beyond the scope of Wharton's small book, she could have addressed their importance as essential components of women's health.

I have categorized the positive aspects of Wharton's book as useful, fascinating or motivating, and the negative aspects as irritating or "bosh."

Useful: Wharton includes content that is up to date, relevant and interesting. She covers areas such as periconceptional folic-acid supplementation, ambulation during labour and the benefits of breast milk for feeding infants. **Fascinating:** The material on herbal and homeopathic reme-

dies is an education for both lay and professional readers. Wharton's writing style is excellent for most patients with good literacy skills. She writes clear descriptions of reproductive anatomy and physiology. **Motivating:** Wharton has a convincing ability to exhort readers to choose a healthier lifestyle (e.g., eat less fat and get more exercise), in a manner that is friendly and nonconfrontational.

Irritating: What irritated me most was Wharton's tendency to precede a strong opinion about a medical issue with a statement such as "studies show" or offer an expert's name and a description of his or her research, but no reference. This book may not be aimed at physicians, but many patients today do not accept health information uncritically either. One of the best aspects of the women's health movement is that consumers now look very carefully at what "experts" say and "studies" show. I would have liked more attention to references and greater clarity about which aspects of her book are derived from clinical opinion and which have a scientific basis. This would have been especially helpful for areas of complementary medicine that have been scientifically researched, such as the use of acupuncture to treat hyperemesis gravidarum. **"Bosh:"** Some of the "bosh" I encountered included inaccurate figures (e.g., Wharton gives the incidence of neural tube defects as 5 in 100 pregnancies) and poor advice (e.g., women under 18 should not consider taking the oral contraceptive pill). Generally, however, Wharton's advice is safe, and she often recommends that women seek a medical opinion before starting or while using complementary remedies.

I plan to lend this book to colleagues and patients who are interested in pursuing a more healthy lifestyle or in a complementary-medicine approach to women's